FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB A	PPROV.	AL
OMB Numbe	er:	3235-0076
Expires:	Apri	1 30, 2008
Estimated a	verage	burden
		1600

hours per response.

SEC USE ONLY

DATERECEIVED

Serial

Prefix

UNIFORM LIMITED OFFERING EXEM	PHON
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock Financing	HELL ST.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	JUL 18 200
A. BASIC IDENTIFICATION DATA	2007
1. Enter the information requested about the issuer	The state of the s
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Adzilla, Inc.	186 gc
Address of Executive Offices (Number and Street, City, State, Zip Code) 1140 West Pender Street, Suite 840, Vancouver, BC Canada V6E 4G1	Telephone Number (Including Area Code) (604) 628-4350
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) N/A	Telephone Number (Including Area Code)
Brief Description of Business	
Internet advertising	PROCESSED
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	olease specify): JUL 2 0 2007
Actual or Estimated Date of Incorporation or Organization: Month Year	mated THOMSON FINANCIAL DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested: Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

SEC 1972 (5-05)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

-ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(cs) that Apply: > Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Farlinger, John Business or Residence Address (Number and Street, City, State, Zip Code) 1140 W. Pender Street, Suite 840, Vancouver BC, Canada V6E 4G1 General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director Managing Partner Full Name (Last name first, if individual) Roker, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 1140 W. Pender Street, Suite 840, Vancouver BC, Canada V6E 4GI Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director Promoter General and/or Managing Partner Full Name (Last name first, if individual) Monsalve, Sergio Business or Residence Address (Number and Street, City, State, Zip Code) 1140 W. Pender Street, Suite 840, Vancouver BC, Canada V6E 4G1 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Hanafi, Ammar Business or Residence Address (Number and Street, City, State, Zip Code) 1140 W. Pender Street, Suite 840, Vancouver BC, Canada V6E 4G1 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Alloy Ventures 2005, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 400 Hamilton Avenue, 4th floor, Palo Alto, CA 94301 Check Box(es) that Apply: ☐ Director Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Norwest Venture Partners X, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 525 University Avenue, Suite 800, Palo Alto, CA 94301-1922 Check Box(es) that Apply: Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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	issuer sole			ntand to see	11 to man a	aaraditad i	nvastoro in	thia offeri	na?		Yes	No 57
1. Has the	ISSUCT SOIC	i, or does ii			n, to non-a Appendix					***************************************		X
2 What is	the minim						-				s N/A	
2. What is	s the minim	um invesm	icht mat w	TH OC ACCC	picu nom a	my marvid	.uai:	***************************************	*****************	*****************	Yes	No
3. Does th	e offering	permit join	t ownershi	p of a sing	le unit?							K
commis If a pers or state	ssion or sim son to be lis	ilar remune ted is an ass ime of the b	ration for s sociated pe roker or de	solicitation rson or age aler. If me	of purchase ent of a brok ore than five	ers in conne er or deale e (5) person	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering. with a state ons of such		
Full Name (Last name	first, if ind	ividual)									
N/A Business or	Residence	Address (N	lumber and	Street C	ity State 2	in Code)						
N/A	Residence	71447655 (1	unioe. uni		,, 0.2.0, 2	p coue,						
Name of As	sociated Br	oker or De	aler			·-· - · - · - · - · - · - · · - · · · ·			· · · · · · · · · · · · · · · · · · ·			
N/A							·					
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(Check	"All States	s" or check	individual	States)								States
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MT RI	NE SC	NV SD	NH TN	TX	UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PR
Full Name (
Business of N/A	r Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Name of As N/A	sociated B	roker or De	aler									
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								**************	*****************	••••	☐ All	States
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RI	SC	SD	TN	TX	ÜT	VT	VA	WA	WV	WI	WY]	PR
Full Name (Last name	first, if ind	ividual)								<u>-</u> -	
Business o	r Residence	: Address (i	Number an	d Street, C	City, State,	Zip Code)						
N/A												<u>. </u>
Name of As N/A	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intende	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)		*******************	***************************************	***************************************	*****************	***************************************	All	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	IH	[D]
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Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security 0.00 10,250,000.04 Common Preferred 0.00 Convertible Securities (including warrants)......\$ 0.00 0.00 Other (Specify ______)\$ 0.00 0.00 s 10,250,000.04 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases \$ 10,250,000.04 Accredited Investors 2 0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold N/A 0.00 Rule 505 0.00 Regulation A N/A N/A 0.00 Rule 504 N/A 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.... 250,000.00 Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify)

C. OFFERING ERICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total

250,000.00

The second	C OFFERING PRICE, NUM	BER ORINVESTORS EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C—proceeds to the issuer."			s 10,000,000.04
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[s	s
	Purchase of real estate	[s
	Purchase, rental or leasing and installation of ma	chinery		
		[
	Construction or leasing of plant buildings and fac-	cilities[s	. [] \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass		٦,	
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			\$. \$
	Column Totals		¬\$	\$ 10,000,000.04
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1	HAND TO THE THE PARTY OF THE PA	D: FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-ac	rnish to the U.S. Securities and Exchange Commis	sion, upon writte	
Īss	uer (Print or Type)	Signature	Date	
Ac	zilla, Inc.		July 10, 2007	
Na	me of Signer (Print or Type)	Title of Signer (Print on Type)		
Joi	n Farlinger	President, Chief Executive Officer & Secretary		
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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E STATE SIGNATURE		en a co	
1.	Is any party described in 17 CFR 230.262 provisions of such rule?			Yes	No 🛣
	S	ee Appendix, Column 5, for state res	ponse.		
2.	The undersigned issuer hereby undertakes t D (17 CFR 239.500) at such times as requ		any state in which this notice is	filed a not	ice on Form
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators	, upon written request, informa	tion furni	shed by the
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of establ	state in which this notice is filed and	l understands that the issuer cla		
	suer has read this notification and knows the co uthorized person.	ntents to be true and has duly caused th	nis notice to be signed on its beha	ılf by th e u	indersigned
ssuer ((Print or Type)	Signature	Date		
Adzilla	a, Inc.		July 10, 2007		

Title (Print or Type)

President, Chief Executive Office & Secretary

Instruction:

Name (Print or Type)

John Farlinger

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A A	PENDLX				
1	Intend to non-a investor	l to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		х	Series A Preferred Stock Financing \$10,000,000.04	2	\$10,000,000.04	0	0		х
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1	Intend to non-ac investors (Part B-	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	(run o num r)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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	to non-acinvestor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		-				_				
PR										

